

OPERATION ENDURING FREEDOM

Redeployment Preventive Medicine Measures (Afghanistan)

Presenter's Name
Presenter's Command
Local Contact Information



Prepared by:
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<http://usachppm.apgea.army.mil>

Redeployment Medical Briefing

- **Purpose of this briefing**
- **Background on health concerns**
- **Key medical threats for Afghanistan**
- **Redeployment Health Assessment**
- **Homecoming stress**
- **The DoD Deployment Health Clinical Center**



Purpose

To ensure that any concerns you may have about your health are addressed and that you understand the medical requirements for re-deployment



Background

- **Your risk of illness and disease does not stop because you are leaving the area of operations.**
- **You may have been exposed to conditions which require continued medical care**
- **Return home and stay safe and healthy**
- **Keep your family and loved ones healthy**

Redeployment Health Guide

- Unfold YOUR *Redeployment Guide*
- Basic information and resources
- Reference Guide for this Briefing



This guide is for use by all active/reserve component military, civilian, retiree, and contractor personnel. Any individual who is returning from any type of military operation should keep and refer to this guide.

The background of the slide is a faded American flag, with the stars and stripes visible. A red rectangular border is positioned around the top-left corner, enclosing the title.

Key Medical Threats

- Malaria
- Tuberculosis
- Whooping Cough

Malaria



- Blood parasite transmitted by mosquitoes
 - Continue taking your malaria medication while on R&R leave and on TDY so that you are protected from the moment you return
 - If redeploying, continue to take your malaria medication **until told to stop by unit medical personnel**
 - **Take the complete course (14 days) of terminal malaria medication (primaquine) to kill any remaining dormant parasites**
 - Ensure you personally know your G6PD status before taking this medication. **Do not take primaquine** if blood testing reveals that you are **G6PD-deficient**

Tuberculosis

- Close contact with local nationals (LNs) may have exposed you to tuberculosis while in theater.
- Tuberculosis is a slow infection that can take months or years to infect the lungs and cause symptoms of disease
- A simple skin test can be used to test you for **possible exposure** to the disease



- You must return 2-3 days after the test to have it read and documented by a health care professional
- Skin testing allows for early detection and treatment

Whooping Cough (1 of 2)

- Whooping cough – also called pertussis – is an **extremely contagious** infection of the respiratory tract You may be ill with pertussis if you have had coughing lasting more than two weeks with any of the following:
 - heavy bouts of coughing (coughing attacks)
 - a high-pitched “whoop” sound at the end of coughing attacks as you gasp for air
 - vomiting after a heavy bout of cough
- Although generally causing a mild or moderate disease among adults, pertussis can be fatal in the very young
- **you were vaccinated** against this disease as a child, but your immunity may have decreased over time
- an adult booster vaccination is available

Whooping Cough (2 of 2)

- **Seek treatment if you experience coughing spells lasting longer than two weeks with any of the following:**
 - breathing in with a high pitch sound
 - heavy bouts of coughing
 - or vomiting after heavy coughing
- **Antibiotics are available**
- **If ill with whooping cough, you are most contagious for three weeks after you have started coughing, unless treated**
- **If you have whooping cough or were exposed to someone who has whooping cough:**
 - avoid contact with infants (less than 12 months old)
 - avoid contact with pregnant women
- **If contact is unavoidable in the performance of your duties seek medical treatment to prevent the spread of infection**

FOR MORE INFORMATION CONTACT YOUR HEALTHCARE PROVIDER PRIOR TO CONTACT

Deployment Health Assessments

MEDPROS

DEPLOYMENT HEALTH ASSESSMENTS

PRE POST PDHRA

Soldiers deploying or redeploying from theater can now complete their portion of the Pre, Post or Post Deployment Health Reassessment online before their scheduled deployment processing at which time a medical provider will complete the assessment with the Soldier. **Do not complete online unless instructed to do so by your Chain of Command.** Click here ([Deployment Health Assessments](#)) to begin your assessment.

Ultimate Warrior Community >>>

Ultimate Warrior Community



Post Deployment Health Re-Assessment (PDHRA)

MEDPROS

POST DEPLOYMENT HEALTH REASSESSMENT

Soldiers deployed to a combat zone for more than 30 days are eligible to complete the Post Deployment Health Reassessment (PDHRA) 90-days after redeployment/de-mobilization. ** As a goal, Commanders should attempt to screen Soldiers 90-180 days after their return.

The POCs for the PDHRA program are:

Department of the Army

LTC Kenneth Ross

e-mail: Kenneth.Ross@hqda.army.mil

Active Army

COL Phyllis Chelette

e-mail: Phyllis.Chelette@us.army.mil

- Available through AKO under the "Self Service " tab click "My Medical", then select "My Medical Readiness Data"

DEPLOYMENT HEALTH ASSESSMENTS

Commanders who would like to receive additional information regarding PDHRA screenings can do so by clicking the link below:

[Commander Training](#)

Soldier Training:

Soldiers who would like to receive additional information regarding PDHRA screenings can do so by clicking the link below:

[Soldier Training](#)

Deployment Health Assessments

Pre Deployment
DD2795

Post
Deployment
DD2796

Post
Deployment
Health
Reassessment
DD2900

Deployment
Health
Assessments

Please select the survey you would like to view, edit, or complete

PRE DEPLOYMENT HEALTH ASSESSMENT FORM

(Should be completed within 30 Days prior to Deployment Date)

DD2795

POST DEPLOYMENT HEALTH ASSESSMENT FORM

(Should normally be completed within 30 Days prior to Re-Deployment or immediately upon return)

DD2796

POST DEPLOYMENT HEALTH REASSESSMENT FORM

(Should be completed 90 - 180 days from Post Deployment Date)

DD2900

Post-Deployment Health Assessment Form

Page 1: Service Member Administrative Information



Authority: 10 U.S.C. 136 Chapter 55: 10741, 3013, 5013, 8013 and E.O. 9397

Principal Purpose: To assess your state of health after deployment outside the United States in support of military operations and to assist military healthcare providers in identifying and providing present and future medical care to you.

Routine Use: To other Federal and State agencies and civilian healthcare providers, as necessary, in order to provide necessary medical care and treatment.

Disclosure: (Military personnel and DoD civilian Employees Only) Voluntary. If not provided, healthcare WILL BE furnished, but comprehensive care may not be possible.

INSTRUCTIONS: Please read each question completely and carefully before marking your selections. Provide a response for each question. If you do not understand a question, ask the administrator.

Demographics		
Last Name		Today's Date (dd/mm/yyyy)
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
First Name	MI	Social Security Number
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Name of Your Unit or Ship during this Deployment		DOB (dd/mm/yyyy)
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Gender	Service Branch	Component
<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Air Force <input type="radio"/> Army <input type="radio"/> Coast Guard <input type="radio"/> Marine Corps <input type="radio"/> Navy <input type="radio"/> Other	<input type="radio"/> Active Duty <input type="radio"/> National Guard <input type="radio"/> Reserves <input type="radio"/> Civilian Government Employee
Location of Operation		Pay Grade
<input type="radio"/> Europe <input type="radio"/> SW Asia <input type="radio"/> SE Asia <input type="radio"/> Asia (Other)	<input type="radio"/> Australia <input type="radio"/> Africa <input type="radio"/> Central America <input type="radio"/> Unknown	<input type="radio"/> South America <input type="radio"/> North America <input type="radio"/> Other
To what areas were you mainly deployed: (mark all that apply - list where/date arrived)		<input type="radio"/> E1 <input type="radio"/> E2 <input type="radio"/> E3 <input type="radio"/> E4 <input type="radio"/> E5 <input type="radio"/> E6 <input type="radio"/> E7 <input type="radio"/> E8 <input type="radio"/> E9
<input type="radio"/> Kuwait <input type="radio"/> Qatar <input type="radio"/> Afghanistan <input type="radio"/> Bosnia <input type="radio"/> On a ship	<input type="radio"/> Iraq <input type="radio"/> Turkey <input type="radio"/> Uzbekistan <input type="radio"/> Kosovo <input type="radio"/> CONUS <input type="radio"/> Other	<input type="radio"/> O01 <input type="radio"/> O02 <input type="radio"/> O03 <input type="radio"/> O04 <input type="radio"/> O05 <input type="radio"/> O06 <input type="radio"/> O07 <input type="radio"/> O08 <input type="radio"/> O09 <input type="radio"/> O10
Name of Operation:		<input type="radio"/> W1 <input type="radio"/> W2 <input type="radio"/> W3 <input type="radio"/> W4 <input type="radio"/> W5 <input type="radio"/> Other
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Occupational specialty during this deployment (MOS, NEC or AFSC)		
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Combat specialty:		
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Administrator Use Only

Indicate the status of each of the following

Yes No N/A

☐ ☐ ☐ Medical threat briefing completed
☐ ☐ ☐ Medical information sheet distributed
☐ ☐ ☐ Post Deployment serum specimen collected

Reset



Post-Deployment Health Assessment Form

- DD Form 2796 must be completed no more than 30 days prior to departing for home station
- Page 1: Administrative information
 - Deployment location
 - Country, list all
 - Operation Enduring Freedom

You will need your DD 2796 in hand to depart from theater

Do not pack it in your bags

Post-Deployment Health Assessment Form

- Page 2: Service Member Report
 - Report vaccinations, medications, and health care during deployment process
 - Report experiences, symptoms or concerns
- Page 3: Service Member Report
 - Report possible exposures and duration
 - Identify potentially hazardous situations that may concern you

You will need your DD 2796 to out-process from theater

Post-Deployment Health Assessment Form

Page 4: Health Care Provider Assessment

Health Care Provider Only	
SERVICE MEMBER'S SOCIAL SECURITY #	<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>
Post-Deployment Health Care Provider Review, Interview, and Assessment	
Interview	
1. Would you rate your health in general as:	<input type="radio"/> Excellent <input type="radio"/> Very Good <input type="radio"/> Good <input type="radio"/> Fair <input type="radio"/> Poor
2. Do you have any medical or dental problems that developed during this deployment?	<input type="radio"/> Yes <input type="radio"/> No
3. Are you currently on a profile or light duty?	<input type="radio"/> Yes <input type="radio"/> No
4. During this deployment have you sought, or do you now intend to seek, counseling or care for your mental health?	<input type="radio"/> Yes <input type="radio"/> No
5. Do you have concerns about possible exposures or events during this deployment that you feel may affect your health? Please list concerns: _____	<input type="radio"/> Yes <input type="radio"/> No
6. Do you currently have any questions or concerns about your health? Please list concerns: _____	<input type="radio"/> Yes <input type="radio"/> No
Health Assessment	
After my interview/exam of the service member and review of this form, there is a need for further evaluation as indicated below. (More than one may be noted for patients with multiple problems. Further documentation of the problem evaluation to be placed in the service member's medical record.)	
REFERRAL INDICATED FOR: <input type="radio"/> None <input type="radio"/> Cardiac <input type="radio"/> Combat/Operational Stress Reaction <input type="radio"/> Dental <input type="radio"/> Dermatology <input type="radio"/> EENT <input type="radio"/> Eye <input type="radio"/> Family Problems <input type="radio"/> Fatigue, Malaise, Multisystem complaint <input type="radio"/> Audiology Comments: _____	EXPOSURE CONCERNS (During deployment): <input type="radio"/> GI <input type="radio"/> GU <input type="radio"/> GYN <input type="radio"/> Mental Health <input type="radio"/> Neurologic <input type="radio"/> Orthopedic <input type="radio"/> Pregnancy <input type="radio"/> Pulmonary <input type="radio"/> Other _____ <input type="radio"/> Environmental <input type="radio"/> Occupational <input type="radio"/> Combat or mission related <input type="radio"/> None
I certify that this review process has been completed. Provider's signature and stamp: <div style="border: 1px solid black; width: 200px; height: 40px; display: inline-block;"></div>	
This visit is coded by: V70.5 __ 6 Date (dd/mm/yyyy): <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> / <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> / <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>	
End of Health Review	
DD FORM 2796, APR 2003	ASD(HA) APPROVED <div style="border: 1px solid black; padding: 2px;">Reset</div> <div style="border: 1px solid black; width: 40px; height: 40px; display: inline-block; text-align: center; vertical-align: middle;">32348</div>

Reunion with Family and Friends

- Reunion is a part of the deployment cycle and can be filled with joy and stress. Reintegration into the family structure is a critical process.
- Refer to the ***A Soldier and Family Guide to Redeploying*** for things to remember during reunion with family and friends.
- Chaplains and counselors are available to help cope with homecoming stress.



Homecoming Stress

- Do not expect things to be exactly the same, especially if returning from a long deployment
- Ease back into roles; do not rush things
- Children may be withdrawn
- Spouse may be moody or depressed
- Financial and property issues may require immediate attention
- If needed, seek counseling from Chaplain or medical personnel

DoD Deployment Health Clinical Center

Walter Reed Army Medical Center

6900 Georgia Avenue, NW

Building 2, Room 3G04

Washington, DC 20307-5001

Phone: (202) 782-3577

DSN: 662-3577

Toll Free Help Line: (800) 796-9699

Europe Toll Free: 00800-8666-8666

<http://www.pdhealth.mil>

Remember “deploymenthealth.mil”

Summary

- Continue taking your malaria medication until directed otherwise by unit medical personnel
- Continue taking malaria medication while on R&R leave or TDY
- Determine your G6PD status and unless deficient take the full 14 days of primaquine after redeployment
- If infectious with whooping cough, seek medical care at least five days prior to close contact with infants and women who are pregnant

Conclusion

It is important to the US military and the Nation that you enjoy good health as you rejoin your family and friends upon return to home station.

If you have health problems or concerns, it is critical that you let someone know. It will not delay your departure for home station.

What are your questions?